

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document

Date Received
Official Use Only

APR 08 2010

By

FPPC

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Ashburn	Roy			
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE
OPTIONAL E-MAIL ADDRESS				

1. Office, Agency, or Court

Name of Office, Agency, or Court:

California State Senate

Division, Board, District, if applicable:

18th District

Your Position:

Senator

► If filing for multiple positions, list additional agency(ies)/
 position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State☐ County of _____☐ City of _____☐ Multi-County _____☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009,
through December 31, 2009.

-or-

☐ The period covered is ____/____/____ through
December 31, 2009.☐ Leaving Office Date Left: ____/____/____
(Check one)☐ The period covered is January 1, 2009, through the
date of leaving office.

-or-

☐ The period covered is ____/____/____, through
the date of leaving office.☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages
including this cover page: _____► Check applicable schedules or "No reportable
interests."I have disclosed interests on one or more of the
attached schedules:Schedule A-1 ☐ Yes — schedule attached

Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes — schedule attached

Investments (10% or Greater Ownership)

Schedule B ☐ Yes — schedule attached

Real Property

Schedule C ☐ Yes — schedule attachedIncome, Loans, & Business Positions (Income Other than Gifts
and Travel Payments)Schedule D ☐ Yes — schedule attached

Income — Gifts

Schedule E ☐ Yes — schedule attached

Income — Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this
 statement. I have reviewed this statement and to the best of
 my knowledge the information contained herein and in any
 attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State
 of California that the foregoing is true and correct.

Date Signed

4-7-2010

Signature

(File the originally signed statement with your filing official)

2010 MAR -1 PM 5:12

FEB 25 2010

A Public Document

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Ashburn	Roy			
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☐ State

☐ County of _____

☐ City of _____

☒ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 4

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☒ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes – schedule attached
Income – Gifts

Schedule E ☐ Yes – schedule attached
Income – Gifts – Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

2-24-2010

Signature

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Roy Ashburn

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

KERN Radio 1410

ADDRESS (Business Address Acceptable)

1400 Easton Dr., #1444, Bakersfield, CA 93309

BUSINESS ACTIVITY, IF ANY, OF SOURCE

The Roy Ashburn Show

YOUR BUSINESS POSITION

Show Host

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address
City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Roy Ashburn

► NAME OF SOURCE
Maersk Inc.

ADDRESS (Business Address Acceptable)
P.O. Box 880, Madison, NJ 07940

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Global commerce

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 27 / 09	\$ 420.00	meals, transportation
/ /	\$	
/ /	\$	

► NAME OF SOURCE
Council for Legislative Excellence

ADDRESS (Business Address Acceptable)
2150 River Plaza Dr. Ste 150, Sacramento CA 95833

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 04 / 09	\$ 264.57	Briefcase, cufflinks,
/ /	\$	
/ /	\$	

► NAME OF SOURCE
California Chamber of Commerce

ADDRESS (Business Address Acceptable)
1215 K St., 1400, Sacramento 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Chamber

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 18 / 09	\$ 65.46	Dinner
05 / 18 / 09	\$ 30.13	Reception
05 / 19 / 09	\$ 11.14	Breakfast

► NAME OF SOURCE
California Citrus Mutual

ADDRESS (Business Address Acceptable)
512 North Kaweah Ave, Exeter, CA 93221

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Oranges

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 17 / 09	\$ 87.55	Dinner
03 / 16 / 09	\$ 5.50	Oranges
/ /	\$	

► NAME OF SOURCE
California Tribal Business Alliance

ADDRESS (Business Address Acceptable)
1530 J, Sacramento CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Indian Affairs

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 14 / 09	\$ 88.77	Food and beverage
/ /	\$	
/ /	\$	

► NAME OF SOURCE
Rio Tinto

ADDRESS (Business Address Acceptable)
P.O. Box 6609 Englewood, CO 80155

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Minerals

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 02 / 09	\$ 108.27	Dinner
/ /	\$	
/ /	\$	

Comments: _____

SCHEDULE D
Income – Gifts

Name

Roy Ashburn

► NAME OF SOURCE

California Chamber of Commerce

ADDRESS (Business Address Acceptable)

1215 K St. Ste. 1400 Sacramento CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Economic development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 16 / 09	\$ 28.31	Meal
__ / __ / __	\$	
__ / __ / __	\$	

► NAME OF SOURCE

California Correctional Peace Officers Asso.

ADDRESS (Business Address Acceptable)

1415 L St. Sacramento CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Corrections

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 22 / 09	\$ 150.19	Meal
__ / __ / __	\$	
__ / __ / __	\$	

► NAME OF SOURCE

Walt Disney Company

ADDRESS (Business Address Acceptable)

500 S. Buena Vista St., Burbank CA 91521

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Entertainment

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 11 / 09	\$ 409.00	Tickets
__ / __ / __	\$	
__ / __ / __	\$	

► NAME OF SOURCE

Iridium Concesiones de Infraestructuras, S.A.

ADDRESS (Business Address Acceptable)

Avada Camino de Santiago, 50 28050 Madrid

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Infrastructure development company

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 05 / 09	\$ 99.50	Lunch
__ / __ / __	\$	
__ / __ / __	\$	

► NAME OF SOURCE

Parliament Catalonia

ADDRESS (Business Address Acceptable)

Parc de la Ciudadela, 008003 Barcelona-Spain

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 05 / 09	\$ 4200.00	Trans. meals activities
__ / __ / __	\$	
__ / __ / __	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
__ / __ / __	\$	
__ / __ / __	\$	
__ / __ / __	\$	

Comments: